UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re: ELISHEVA L COLE	Case No. 15-19650
Debtor(s)	

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 06/04/2015.
- 2) The plan was confirmed on 02/10/2016.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on 01/06/2017.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on \underline{NA} .
 - 5) The case was dismissed on 06/07/2017.
 - 6) Number of months from filing to last payment: 19.
 - 7) Number of months case was pending: 25.
 - 8) Total value of assets abandoned by court order: NA.
 - 9) Total value of assets exempted: NA.
 - 10) Amount of unsecured claims discharged without payment: \$0.00.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$6,669.00 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$6,669.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$1,788.52
Court Costs \$0.00
Trustee Expenses & Compensation \$291.41
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION: \$2,079.93

Attorney fees paid and disclosed by debtor: \$90.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
American Financial Cre	Unsecured	127.00	NA	NA	0.00	0.00
American Financial Cre	Unsecured	35.00	NA	NA	0.00	0.00
CAPITAL ONE AUTO FINANCE	Secured	9,900.00	13,298.00	9,900.00	4,252.50	336.57
CAPITAL ONE AUTO FINANCE	Unsecured	2,686.00	339.07	3,737.07	0.00	0.00
CITY OF CALUMET CITY	Unsecured	270.00	540.00	540.00	0.00	0.00
CITY OF CHICAGO HEIGHTS	Unsecured	200.00	NA	NA	0.00	0.00
CITY OF COUNTRY CLUB HILLS	Unsecured	200.00	NA	NA	0.00	0.00
COMCAST	Unsecured	451.00	NA	NA	0.00	0.00
COMCAST	Unsecured	262.00	NA	NA	0.00	0.00
Commonwealth Financial	Unsecured	140.00	NA	NA	0.00	0.00
Commonwealth Financial	Unsecured	83.00	NA	NA	0.00	0.00
Commonwealth Financial	Unsecured	57.00	NA	NA	0.00	0.00
Commonwealth Financial	Unsecured	60.00	NA	NA	0.00	0.00
CONSUMER PORTFOLIO SERV	Unsecured	10,324.00	10,791.51	10,791.51	0.00	0.00
ECMC	Unsecured	NA	9,583.56	9,583.56	0.00	0.00
ENHANCED RECOVERY CO L	Unsecured	321.00	NA	NA	0.00	0.00
IL DEPT OF EMPLOYMENT SECURITY	Unsecured	5,449.00	5,449.00	5,449.00	0.00	0.00
MAGE & PRICE	Unsecured	106.00	NA	NA	0.00	0.00
MRSI	Unsecured	6,550.00	NA	NA	0.00	0.00
PROGRESSIVE INSURANCE CO	Unsecured	362.00	NA	NA	0.00	0.00
ST IL TOLLWAY AUTHORITY	Unsecured	786.50	7,197.30	7,197.30	0.00	0.00
ST JAMES HOSPITAL	Unsecured	2,527.00	NA	NA	0.00	0.00
ST JAMES HOSPITAL	Unsecured	762.00	NA	NA	0.00	0.00
ST JAMES HOSPITAL	Unsecured	204.00	NA	NA	0.00	0.00
ST JAMES HOSPITAL	Unsecured	150.00	NA	NA	0.00	0.00
ST JAMES HOSPITAL	Unsecured	105.00	NA	NA	0.00	0.00
ST JAMES HOSPITAL	Unsecured	50.00	NA	NA	0.00	0.00
SULLIVAN URGENT AID CENTERS	Unsecured	145.00	1,181.00	1,181.00	0.00	0.00
TSI 980	Unsecured	1,144.00	NA	NA	0.00	0.00
TSI 980	Unsecured	860.00	NA	NA	0.00	0.00
TSI 980	Unsecured	803.00	NA	NA	0.00	0.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
TSI 980	Unsecured	578.00	NA	NA	0.00	0.00
TSI 980	Unsecured	435.00	NA	NA	0.00	0.00
TSI 980	Unsecured	433.00	NA	NA	0.00	0.00
TSI 980	Unsecured	292.00	NA	NA	0.00	0.00
TSI 980	Unsecured	288.00	NA	NA	0.00	0.00
Unique National Collec	Unsecured	124.00	NA	NA	0.00	0.00
Unique National Collec	Unsecured	69.00	NA	NA	0.00	0.00
VILLAGE OF HAZEL CREST	Unsecured	200.00	NA	NA	0.00	0.00
VILLAGE OF MATTESON	Unsecured	250.00	NA	NA	0.00	0.00
VILLAGE OF MATTESON	Unsecured	250.00	NA	NA	0.00	0.00
VILLAGE OF MATTESON	Unsecured	250.00	NA	NA	0.00	0.00
VILLAGE OF MATTESON	Unsecured	250.00	NA	NA	0.00	0.00
VILLAGE OF MATTESON	Unsecured	250.00	NA	NA	0.00	0.00
VILLAGE OF MATTESON	Unsecured	250.00	NA	NA	0.00	0.00
VILLAGE OF OLYMPIA FIELDS	Unsecured	270.00	270.00	270.00	0.00	0.00
WOW CABLE	Unsecured	532.00	NA	NA	0.00	0.00

Claim	Principal	Interest
Allowed	<u>Paid</u>	<u>Paid</u>
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$9,900.00	\$4,252.50	\$336.57
\$0.00	\$0.00	\$0.00
\$9,900.00	\$4,252.50	\$336.57
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$38,749.44	\$0.00	\$0.00
	\$0.00 \$0.00 \$9,900.00 \$0.00 \$9,900.00 \$0.00 \$0.00 \$0.00 \$0.00	Allowed Paid \$0.00 \$0.00 \$0.00 \$0.00 \$9,900.00 \$4,252.50 \$0.00 \$0.00 \$9,900.00 \$4,252.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$2,079.93 \$4,589.07	
TOTAL DISBURSEMENTS :		<u>\$6,669.00</u>

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12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 07/10/2017 By: /s/ Tom Vaughn
Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.